Tramadol

Class: Analgesic, opioid.

Indications: Relief of moderate to moderately-severe pain

Extended release formulations are indicated for patients requiring around-the-clock management of moderate to moderately-severe pain for an extended period of time

Available dosage form in the hospital: Capsule: 50 mg.

Tablet: 100 mg.

Ampoule: 100 mg/ 2mL.

Dosage:

-Moderate-to-severe pain: Oral:

-Immediate release: 50-100 mg every 4-6 hours (not to exceed 400 mg/day). For patients not requiring rapid onset of effect, tolerability may be improved by starting dose at 25 mg/day and titrating dose by 25 mg every 3 days, until reaching 25 mg 4 times/day. The total daily dose may then be increased by 50 mg every 3 days as tolerated, to reach dose of 50 mg 4 times/day. After titration, 50-100 mg may be given every 4-6 hours as needed up to a maximum 400 mg/day.

-Orally-disintegrating tablet (Rybix™ ODT): 50-100 mg every 4-6 hours (not to exceed 400 mg/day); for patients not requiring rapid onset of effect, tolerability may be improved by starting dose at 50 mg/day and titrating dose by 50 mg every 3 days, until reaching 50 mg 4 times/day. After titration, 50-100 mg may be given every 4-6 hours as needed up to a maximum 400 mg/day.

-Extended release:

U.S. labeling: ConZip™, Ultram® ER:

- Patients not currently on immediate-release tramadol: 100 mg once daily; titrate every 5 days (ConZip™, Ultram® ER); maximum dose: 300 mg daily
- Patients currently on immediate-release tramadol: Calculate 24-hour immediate release total dose and initiate total extended release daily dose (round dose to the next lowest 100 mg increment); titrate as tolerated to desired effect (maximum: 300 mg daily)

Canadian labeling: **Note:** Patients currently on immediate-release tramadol: When switching to extended release, initiate at the same or lowest nearest total daily tramadol dose. Not to exceed recommended maximum daily dosing.

- Durela™, Ralivia™, Tridural™: Patients not currently on immediate-release tramadol or opioids: Initial: 100 mg once daily; titrate every 5 days (Durela™, Ralivia™) or every 2 days (Tridural™) as needed based on clinical response and severity of pain (maximum: 300 mg daily)
- Zytram® XL: Patients not currently on immediate-release tramadol or opioids: 150 mg once daily; if pain relief is not achieved may titrate by increasing dosage incrementally, with sufficient time to evaluate effect of increased dosage; generally not more often than every 7 days (maximum: 400 mg daily)

-Tramadol 100mg/2ml. solution for injection.

The lowest effective dose for analgesia should generally be selected.
Adults and children 12 years and over:
-The usual dose is 50mg or 100mg 4 to 6 hourly by either intramuscular or intravenous routes. Intravenous injections must be given slowly over 2–3 minutes. The dose should be adjusted according to the severity of the pain and the response.
-For post-operative pain, an initial bolus of 100mg is administered. During the 60 minutes following the initial bolus, further doses of 50mg may be given every 10-20 minutes, up to a total dose of 250mg including the initial bolus. Subsequent doses should be 50mg or 100mg 4-6 hourly up to a total daily dose of 600mg.

Geriatric
-Elderly >65 years: Oral: Use caution and initiate at the lower end of the dosing range. Refer to adult dosing.
-Elderly >75 years:

- Immediate release: Do not exceed 300 mg/day; see dosing adjustments for renal and hepatic impairment.
- Extended release: Use with great caution; see dosing for adults, renal, and hepatic impairment.

Renal Impairment:
- Immediate release: Cl_{cr} <30 mL/minute: Administer 50-100 mg dose every 12 hours (maximum: 200 mg/day).
- Extended release: Should not be used in patients with Cl_{cr} <30 mL/minute.

Hepatic Impairment:
- Immediate release: Cirrhosis: Recommended dose: 50 mg every 12 hours.
- Extended release: Should not be used in patients with severe (Child-Pugh class C) hepatic dysfunction.

Common side effects: >10%:

Cardiovascular: Flushing (8% to 16%)

Central nervous system: Dizziness (10% to 33%), headache (4% to 32%), somnolence (7% to 25%), insomnia (2% to 11%)

Dermatologic: Pruritus (3% to 12%)

Gastrointestinal: Constipation (9% to 46%), nausea (15% to 40%), vomiting (5% to 17%), dyspepsia (1% to 13%)

Neuromuscular & skeletal: Weakness (4% to 12%)

Pregnancy Risk Factor: C